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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/935,939	
	Filing Date	12/15/03	
	First Named Inventor	FINN	
	Art Unit	3764	
	Examiner Name	Jerome W. Donnelly	
Total Number of Pages in This Submission	14	Attorney Docket Number	

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks <p style="text-align: center;">Please expedite to examiner.</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name			
Signature	<i>Gregory M Finn</i>		
Printed name	Gregory M Finn		
Date	12/26/05	Reg. No.	

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature	<i>Gregory M Finn</i>	
Typed or printed name	Gregory M Finn	Date 12/26/05

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Appln. No.: 10/735,939 (FINN)
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FINN
PATENT APPLICATION

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Pursuant to 37 C.F.R. 1.8, I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on December 26, 2005.


Gregory M. Finn

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:
Gregory Finn

Appln. No.: 10/735,939

Group Art Unit: 3764

Filed: December 15, 2003

Examiner: Jerome W Donnelly

For: PORTABLE DEVICE FOR ASSISTING CHIN-UP AND DIP EXERCISES

* * *

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sent Via Facsimile: (571) 273-8300

Sir:

In response to the Office Action mailed October 28, 2005, please accept and amend the above-identified patent application as indicated below. The Applicant respectfully requests expedited review of the newly amended claims as this amendment is being submitted within 2 months of the Final Office Action.

A complete listing of all claims in the present application, including newly amended claims, begins on page 2 of this paper.

Remarks begin on page 7 of this paper.